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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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Applicant: Jean-Pierre Ferlay

Serial No.: 09/723,345

Filed: November 27, 2000

For: MOBILE
COMMUNICATION
SYSTEM USING LOSS
CABLES AS
TRANSMISSION
ELEMENTS

§ Group Art Unit: 2684
§
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§
§ Examiner: Tanmay S. Lele
§
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§ Atty. Dkt. No.: MTR.0002US
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SEP 14 2004

Technology Center 2600

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

REPLY TO OFFICE ACTION MAILED JUNE 8, 2004

Dear Sir:

In response to the Office Action of June 8, 2004, please amend and reconsider the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 4 of this paper.

Date of Deposit: <u>September 7, 2004</u>
I hereby certify under 37 CFR 1.8(a) that this correspondence is being deposited with the United States Postal Service as first class mail with sufficient postage on the date indicated above and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313.
<u>Ginger Yount</u> Ginger Yount

AMENDMENT TRANSMITTAL LETTER (Large Entity)

Applicant(s): Jean-Pierre Ferlay

Docket No.

MTR.0002US

Application No.

09/723,345

Filing Date

11-27-2000

Examiner

Tanmay S. Lele

Customer No.

21906

Group Art Unit

2684

Confirmation No.

5978

Invention: MOBILE COMMUNICATION SYSTEM USING LOSS CABLES AS TRANSMISSION ELEMENTS

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SEP 14 2004

COMMISSIONER FOR PATENTS:

Technology Center 2600

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	8 -	20 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	1 -	3 =	0 x	\$86.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00

- ☒ No additional fee is required for amendment.
- ☐ Please charge Deposit Account No. _____ in the amount of _____
- ☐ A check in the amount of _____ to cover the filing fee is enclosed.
- ☒ The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 20-1504
- ☒ Any additional filing fees required under 37 C.F.R. 1.16.
- ☒ Any patent application processing fees under 37 CFR 1.17.


Signature

Dated: September 7, 2004

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